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PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031

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distribution of the state of th	Application Number	10/692,171				
TRANSMITTAL	Filing Date	10/23/2003				
FORM	First Named Inventor	Edgar A. O'Rear III et al.				
	Art Unit	1773				
(to be used for all correspondence after initial filing)	Examiner Name	Sheeba Ahmed				
Total Number of Pages in This Submission	Attorney Docket Number	5820.643				

ENCLOSURES (Check all that apply)								
\checkmark	Fee Transmittal Form	Drawing(s)		After All	owance Communication to TC			
	Fee Attached	Licensing-related Papers			Communication to Board als and Interferences			
	Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Actorney Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks 1. Transmittal (1 page); 2. Fee Transmittal (1 page); 3. Credit Card Payment Form (1 page); 4. Petition for Extension of Time (1 pages); 5. Amendment (10 pages);	e);	(Appeal Propried	Communication to TC Notice, Brief, Reply Brief) Pary Information Letter Inclosure(s) (please Identify			
		Copy of Article on Emulsion Polyn Acknowledgment postcard.			o pages);			
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Firm N	Name	P CODDING & ROGERS	, P.C.					
Signat								
Printe	d name	Douglas J. Sorosco						
Date	10/26/2	007 R	eg. No.		43,145			
CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on								
the da	te shown below: *** SENT BY EXPILES	8 DATE NO. EVS 2674583US, DATED 10/26/20	007***		-			
Typed	Lor printed name	Douglas J. Sorocco		Date	10/26/2007			

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PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE erwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. oursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/692.171 **Application Number** FEE TRANSMIT 10/23/2003 Filing Date For FY 2007 Edgar A. O'Rear III et al. First Named Inventor Sheeba Ahmed **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 1773 Art Unit TOTAL AMOUNT OF PAYMENT (\$) 230.00 5820.643 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES SEARCH FEES **EXAMINATION FEES FILING FEES Small Entity Small Entity Small Entity** Fees Paid (\$) Application Type Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 300 500 200 100 Utility 150 250 130 200 100 65 Design 100 50 160 Plant 200 100 300 150 80 300 500 600 300 Reissue 150 250 200 100 0 0 Provisional **Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description 50 25 Each claim over 20 (including Reissues) 100 200 Each independent claim over 3 (including Reissues) 360 Multiple dependent claims Multiple Dependent Claims Extra Claims Fee (\$) Total Claims Fee Paid (\$) 0 Fee (\$) - 20 or HP = HP = highest number of total claims paid for, if greater than 20. Extra Claims Fee (\$) Fee Paid (\$) _ - 3 or HP = 0 ___x HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) Extra Sheets Fee (\$) 0 0 / 50 = 1 (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Petition for Extension of Time 230.00 Other (e.g., late filing surcharge):

SUBMITTED FOR					
Signature		Registration No. (Attorney/Agent)	43,145	Telephone	405-607-8600
Name (Print/Type)	Douglas J. S	Sorocco		Date 1	0/26/2007

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